

DO/EO BIBLIOGRAPHIC DATA ENTRY

SERIAL NUMBER:	09 / 380340	RECEIPT DATE:	09 / 03 / 99
IA NUMBER:	PCT/ GB98 / 00713	IA FILING DATE:	03 / 05 / 98
FAMILY NAME:	DOYLE	DELAY WAIVED (Y/N):	N
GIVEN NAME:	KELVIN CONRAD	DEMAND RECEIVED (Y/N):	N
PRIORITY CLAIMED (Y/N):	Y	PRIORITY DATE:	03 / 05 / 97
NO BASIC FEE (Y/N):	N	US DESIGNATED ONLY (Y/N):	N
ATTORNEY DOCKET NUMBER:		COUNTRY:	GBX
CORRESPONDENCE NAME/ADDRESS:	CUSTOMER NUMBER:	TELEPHONE	
		FAX	

NAME: KELVIN DOYLE

STREET: 4 ARTILLERY PLACE

MEPHAM CRESCENT

CITY: HARROW MIDDLESEX

STATE/COUNTRY: GB2 ZIP: HA360J

MAIL:

APPLICATION TITLES:

HINGE MECHANISM FOR A LIME PROTECTOR

TAB TO LAST POSITION, PUSH SEND

SERIAL NUMBER	FILING DATE	CLASS	GROUP ART UNIT	ATTORNEY DOCKET NO.	
09/380,340	11/29/99	602	3764		
APPLICANT	KELVIN DOYLE, HARROW, ENGLAND.				
	CONTINUING DOMESTIC DATA*** VERIFIED <u>NONE</u>				
	371 (NAT'L STAGE) DATA*** VERIFIED THIS APPLN IS A 371 OF PCT/GB98/00713 03/05/98 <u>YES</u>				
	FOREIGN APPLICATIONS*** VERIFIED ENGLAND 9704586.8 03/05/97 <u>YES</u>				
IF REQUIRED, FOREIGN FILING LICENSE GRANTED 02/15/00 ** SMALL ENTITY **					
Foreign Priority claimed 35 USC 119 (a-d) conditions met	<input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance	STATE OR COUNTRY GB	SHEETS DRAWING 2	TOTAL CLAIMS 12	INDEPENDENT CLAIMS 1
Verified and Acknowledged Examiner's Initials _____ Initials _____					
ADDRESS	KELVIN DOYLE 4 ARTILLERY PLACE MEPHAM CRESCENT HA36QJ HARROW ENGLAND				
	AIR MAIL				
TITLE	HINGE MECHANISM FOR A LIMB PROTECTOR				
FILING FEE RECEIVED	FEES: Authority has been given in Paper		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing)		